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**SUPPLEMENTARY ANNUAL REPORT FOR
GROUND WATER MONITORING INFORMATION**

02/28/86

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ENCLOSURE**

SUPPLEMENTARY ANNUAL REPORT FORM. GROUND WATER
MONITORING INFORMATION

Applicability: This Supplementary Annual report Form should be completed by all facilities required by OAC 3745-65-90 to conduct ground water monitoring.

PART I: FACILITY IDENTIFICATION

Date of Submission: February 28, 1986

U.S. DOE Feed Materials

Facility Name: Production Center

HWFAB Permit # - -

Mailing Address: U.S. Department of Energy

ATTN: Environmental Protection Branch

Post Office Box E

Oak Ridge, TN 47831

Check Applicable Process Codes
☐ S04, Storage in Surface Impoundment
☐ T02, Treatment in Surface Impoundment
☒ D80, Disposal in Landfill
☐ D81, Disposal by Land Application
☐ D83, Disposal in Surface Impoundment

County: Hamilton

Facility Contact: Susan LeStrange

Phone Number: (615) 576-0845

Please note that the process codes listed above conform to those found in your Part A application, and not to the annual report form which you will receive in a separate mailing.

PART II: GROUND WATER MONITORING INFORMATION

Instructions

Section 1: Include Indicator Parameter values from all RCRA wells. report values of upgradient well(s) first. Upgradient wells should have four replicate measures of each parameter for each sampling date. Please designate wells as upgradient (UP) or downgradient (DN); for example, W2, DN. If more than one measure of each indicator parameter was made from samples taken from downgradient wells, please report these as well. Attach additional pages as needed. Facilities that have not completed 4 quarters of data should briefly explain why.

Section 2: Only facilities that have completed 4 quarters of ground water monitoring data and, at least, the first semi-annual sampling of indicator parameters need report anything in this section. Report upgradient well(s) first. Put "NOT APPLICABLE" under the section heading, if appropriate. Attach additional pages as needed.

Section 3: Report well elevations in Mean Sea Level. Identify elevations by well number and location (upgradient, downgradient). Record, under each quarterly heading, the dates that elevations were taken. Report results of evaluation of elevations and describe response to that evaluation, where applicable.

Section 4: Summarize efforts to determine rate and extent of migration of hazardous waste constituents in the ground water, and the concentrations of the hazardous waste or hazardous waste constituents in the ground water. Report results of analysis. Put "NOT APPLICABLE" under the section heading, if appropriate.

SUPPLEMENTARY ANNUAL REPORT FORM (SARF) FOR
MONITORING INFORMATION

SECTION 1: REPORT VALUES OF INDICATOR PARAMETERS FROM SAMPLES COLLECTED DURING
BASELINE YEAR GAC 3745 65-94(A)(2)(b) (for upgradient wells,
include mean and variance statistics following concentration
values.)

Well ID	Date Sampled ¹	TOH (mg/L)	TOC (mg/L)	pH S.U.	Specific Conductance µMHOS/cm
MW12, UP	8/1/85 (Run 1)	<0.01	<1.00	7.42	880
	8/1/85 (Run 2)	<0.01	<1.00	7.47	880
	8/1/85 (Run 3)	<0.01	<1.00	7.49	880
	8/1/85 (Run 4)	<0.01	<1.00	7.52	880
	8/1/85 (Mean)	<0.01	<1.00	7.48	980
	8/1/85 (S.D.)	0.00	0.00	0.042	0.00
TP19, DN	8/1/85 (Run 1)	0.07700	4.00	6.49	2,350
	8/1/85 (Run 2)	0.07900	4.00	6.49	2,350
	8/1/85 (Run 3)	0.08200	4.00	6.52	2,350
	8/1/85 (Run 4)	0.08300	4.00	6.52	2,350
	8/1/85 (Mean)	0.08025	4.00	6.63	2,350
	8/1/85 (S.D.)	0.00275	0.00	0.593	0.00
TP21, DN	8/1/85 (Run 1)	<0.01	4.00	6.98	1,000
	8/1/85 (Run 2)	<0.01	4.00	7.00	1,000
	8/1/85 (Run 3)	<0.01	4.00	7.00	1,000
	8/1/85 (Run 4)	<0.01	4.00	6.99	1,000
	8/1/85 (Mean)	<0.01	4.00	6.99	1,000
	8/1/85 (S.D.)	0.00	0.00	0.414	0.00
TP22, DN	8/1/85 (Run 1)	<0.01	7.00	6.75	1,950
	8/1/85 (Run 2)	<0.01	6.00	6.74	1,950
	8/1/85 (Run 3)	<0.01	6.00	6.75	1,950
	8/1/85 (Run 4)	<0.01	7.00	6.76	1,950
	8/1/85 (Mean)	<0.01	6.50	6.75	1,950
	8/1/85 (S.D.)	0.00	0.58	0.008	0.00

¹ Four measures of each sample were performed. Averages and standard deviations are indicated for each set of four runs.

Supplementary Annual Report Form: Ground Water
Monitoring Information

SECTION 2: REPORT STATISTICAL EVALUATION OF INDICATOR PARAMETERS (RESULTS OF
t TEST) OAC 3745-65-94(A)(2)(b)

SEMI-ANNUAL SAMPLING
(not applicable)

Well ID	Date Sampled	TOH (mg/L)	TOC (mg/L)	pH S.U.	Specific Conductance uMHOS
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To be provided upon completion of 4th quarter sampling.

Mean
Variance
background Mean
 t^*
 t_c
Significant difference at .01
(Yes or No)

Well ID	Date Sampled	TOH (mg/L)	TOC (mg/L)	pH S.U.	Specific Conductance uMHOS
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To be provided upon completion of 4th quarter sampling.

Mean
Variance
Background Mean
 t^*
 t_c
Significant difference at .01
(Yes or No)

SUMMARY REPORT FORM
FOR THE 1986 YEAR

SECTION 2:

REPORT RESULTS OF THE EVALUATION OF GROUND WATER SURFACE ELEVATIONS, AND A DESCRIPTION OF THE RESPONSE TO THAT EVALUATION, WHERE APPLICABLE OAC 3745-65-94(A)(2)(c)

Well Elevations in MSL by Sampling Date

Well I.D.	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter
Date:	8-1-86	- To be provided ¹ -		
MW12	606.5'			
TP19	577.2'			
TP21	580.1'			
TP22	579.9'			

SUMMARIZE RESULTS OF AND DESCRIBE RESPONSE TO EVALUATION OF ELEVATIONS

- 1 A summary will be provided upon completion of 4th quarter sampling.

SUPPLEMENTARY ANNUAL REPORT FORM: GROUND WATER
MONITORING INFORMATION

SECTION 4:

REPORT RESULTS OF GROUND WATER QUALITY ASSESSMENT PROGRAM
OAC 3745 69-94(B)

A report summarizing groundwater quality for the subject RCRA facility will be provided upon completion of the 4th quarter sampling. The assessment program at the FMPC consists of quarterly samples for the 1st year from approximately forty(40) monitoring wells and respective analytical results for over a hundred (100) parameters per sample.



State Of Ohio Environmental Protection Agency

7. Box 1049, 361 East Broad St., Columbus, Ohio 43266-0149
(4) 466-8565

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Richard F. Celeste, Governor



NORTHEAST INDUSTRIAL WASTE EXCHANGE
1985 Ohio EPA Survey

The Northeast Industrial Waste Exchange (NIWE) is a service which allows industrial waste generators to more easily find recycling options. The goal of the NIWE is to minimize disposal and maximize the value of byproducts or wastes. This is accomplished through an information service which connects waste generators with waste recyclers using quarterly advertising of recyclable wastes, the NIWE's Listings Catalog. This publication is received by over 900 companies in Ohio and by over 8,500 companies in the U.S. (mostly in the east). This service is financially supported, in part, by Ohio EPA. Your company or facility should be receiving the Listings Catalog now unless you have requested cancellation of your subscription.

Ohio EPA is interested in evaluating the interest and need for continuing waste exchange service in Ohio. We would appreciate your cooperation in answering and returning the form below.

Please return this page along with your 1985 Annual Report to the Division of Solid and Hazardous Waste Management, Ohio EPA.

Did you use (in any way) or read part of the NIWE Listings Catalog in 1985? Yes x
No _____ In 1984? Yes x No _____

2. If yes, how did you use the NIWE Listings Catalog?

- _____ Listed a waste as available for reuse/recycling.
- _____ Listed a waste as wanted for reuse/recycling.
- _____ Inquired about an available waste.
- _____ Inquired about a wanted waste.
- x Used the Listings Catalog as a source of information only (such as referred to the lists of recyclers, read articles on recycling, read about examples of successful waste exchanges).

3. If you have used the NIWE, please quantify any cost savings (as compared to your previous management alternative).

Amount: _____

Comments (quantity, waste type, etc.-optional): _____

4. Would you like to continue to receive the NIWE Listings Catalog? Yes x No _____

5. Do you believe it would be worthwhile for Ohio EPA to continue partial funding for distribution of the NIWE Listings Catalog? Yes x No _____

6. Please change the Listings Catalog mailing addressee/address to: Timothy A. Poff,
Waste Management Div., WMCQ, P. O. Box 398704, Cincinnati, OH 45239

7. Name, company address, phone number of respondent (optional): Same 6

Other Comments: